

**BRAZIL CITY WATER WORKS AND SEWAGE
APPLICATION FOR ADJUSTMENT**

Date: _____ **Account #:** _____
Name: _____
Address: _____

Type of Leak : _____ Underground
 _____ In Walls
 _____ Basement/Crawl Space
 _____ Other: _____

Date leak was discovered: _____

Date leak was repaired: _____

What was done to repair the leak: _____

Who was work done by: _____

Are receipts furnished: **YES** **NO**

The Board of Public Works and Safety meets at **6:00 pm on the second Tuesday** and at **9:00 am on the last Thursday** of each month. For an adjustment to be eligible for that meeting it must be in the office by 3:00 pm the day prior to the meeting.

Customers may call the day following the meeting for results.
To reach the Water Works Office please call (812) 448-1539.

For Office Use Only

Eligible _____ **Non Eligible** _____